

Work Order ID 94580

December-19-12 12:56:19 PM

94580

Page 1

Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals:

Process Plan:

Date: 13-01-2

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D412-664-243

E/DEO

100

0.00

100

DOCUMENT CONTROL

DC

0.00

Memo

Document Control

Photocopy bluefile and create labels as per PPP D412-664-203 CHG 009

110

0.00

110

Packaging

Packaging

Memo

Packaging

0.00

120

0.00

120

BENDING MACHINE - CROSSTUBES

CNC Bend 2

Memo

0.00

CNC Alpha 160 Bender

Bend tube as per Dwg D412-664-243 using CNC bender program 412-aft and Folio FT010

ML 13-02-06

MO 13/01/23

PTO →

MO/RM 13-01-24

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: duhDate: 13/02/14QA Closed: duh

Date:

Work Order: <u>94580</u>	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input checked="" type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. <u>D412-664-203</u>		Skid-tube <input type="checkbox"/>	Crosstube <input checked="" type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. <u>13-7324</u>		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator	13/1/25	120	1	CRUSHING IS over tolerance.	12/2/25	Acceptable per attached S.R.	12/2/25	DAS 16 9-89	DAS 16 9-89
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 94580

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Page 2

Item ID: D412-664-203

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start ***NR1***

QC: Date: SPC (Y/N): Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

QC15- Crosstube Dimensional Check

0.00

130

QC

Memo

0.00

Quality Control

140

Crosstubes

0.00

140

Crosstubes

Memo

0.00

Crosstubes

1-Drill pilot holes in tube as per Dwg D412-664-243 using drill Jig DT8550 & DT8551 and drill table DT8577 using #9 holes as per QSI 10 to install towers.

2-Ream hole to finish size in tube as per Dwg D412-664-243 using drill Jig DT8550 & DT8551. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.

3-SCRIBE PART # & BATCH #

4- *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE *** Deburr & Inspect for surface damage. Repair damage within limits as per Dwg D412-664-243

MO/BM 13/01/28

JW 13-01-30

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Page 3

Item ID: D412-664-203

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160 *160* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***	0.00 0.00		DAS 15 13-130		1			
170 *170* HandFXtube Hand Finishing Crosstubes	 Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** 1- CLEAN CROSSTUBE WITH WASH'N WIPE	0.00 0.00				1	0	0	AS 13-1-31
180 *180* Outsource2 Outsource process - NDT	Outsource process - NDT per QSI038 4.1 Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Liquid Penetrant Inspection as per QSI 038Or Issue P/O: 18997 LPI as per ASTM 1417 Level 2 Attach copy of NDT results to work order	0.00 0.00							CX 13/01/31 0

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 94580

94580

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Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190	Packaging	0.00							
190									
Packaging	Memo	0.00							
Packaging	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
	Inspect for transit damage								
	Ensure copy of NDT results attached to work order.								
200	QC5- Inspect part completeness to step on W/O	0.00							
200									
QC	Memo	0.00							
Quality Control	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
	Inspect for damage & ensure results are as per Dwg D412-664-203								
203		0.00							
203									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
	1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN CROSSTUBE BEFORE CHEMICAL CONVERSION								

IX 13-01-31

1 DAS 05 13-01-31

Rm 13-01-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 94580***94580***

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Item ID: D412-664-203

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
205	QC7-Inspect Chemical Conversion Coat	0.00							
205									
QC	Memo	0.00							
Quality Control	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								

① 13.02.05

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 94580

94580

Page 6

December-19-12 12:56:19 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210	SprayPaint	0.00							
210									
SprayPaint	Memo	0.00							
Spray Painting	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
	Mask underside of crosstube as shown								
	1-Prime inside and outside crosstube as per QSI 005 4.2								
	2-Paint outside crosstube with White Imron as per DEO D412-664-243 and QSI 005 4.2								
	PRIME: 124403								
	Start Time: 7:00								
	Finish Time: 7:45								
	PAINT: 129074								
	Start Time: 4:30								
	Finish Time: 5:30								
	clear: 123790								
	3- Apply clear coat after paint as per DEO								

13-2-2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____																

Work Order ID 94580

94580

Page 7

December-19-12 12:56:19 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
220	QC14- Inspect Spray Paint	0.00							
220									
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								
230		0.00							
230	Crosstubes								
Crosstubes	Memo	0.00							
Crosstubes	Assemble as per Dwg D412-664-203								
	1- Install chafing shield as per DEO D412-664-243. Top holes should be facing up.								
	A/R Proseal 890 Batch: 124028								
	EXP: 7/13								
	2- Lightly scuff the bonded area using a 320 grit sand paper and clean the area with 41058 wash 'n' wipe								
	3- Install support with Scotch-Weld DP460 and install clamps as per DEO Dwg D12-664-243 using installation jig DT9024. Torque clamps as per dwg								
	A/R Scotch-Weld DP460 Batch: 122900								
	EXP: 1-9-13								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
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Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
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FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																		

Work Order ID 94580

94580

Page 8

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Item ID: D412-664-203

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Aft

Start Date: 1/03/13

Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/11/13

Req'd Qty: 1.00

1

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

240

QC5- Inspect part completeness to step on W/O

0.00

240

QC

Memo

0.00

Quality Control

DAS
15
9-89
13-2-S

250

Pick Kit

0.00

250

Packaging

Memo

0.00

Packaging

1/1

SP
13-2-6
8

260

QC4- 100% Inspect kits for completeness

0.00

260

QC

Memo

0.00

Quality Control

SmD
1327

1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 94580

94580

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Item ID: D412-664-203

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Aft

Start Date: 1/03/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/11/13 Req'd Qty: 1.00

1

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

270

0.00

270

Packaging

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D412-664-203

*****Ensure tube is not packaged if curing time is less than 12 hrs, see step 27

for application time & date *****

Time & date of packaging:

Location: 105

1 (DAS) 06 13/2/8 82

280

QC21- Final Inspection - Work Order Release

0.00

280

QC

Memo

0.00

Quality Control

MLJ 13-02-11

CMF 13-02-08

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
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Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																

Picklist Print

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Page 1

Work Order ID: 94580

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 1/03/13

Required Date: 1/11/13

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP Rev:E04.02.16Reformat; Added D3189-1K/DS
 IPP Rev:F 06-03-29 Remove Coments on Pick List JLM
 IPP Rev:G 06.12.08 per ECN 886 EC
 IPP Rev:H 07-04-30 As per Rev D JLM
 IPP Rev:I 08-06-12 add comment in seq. 21 DD verified by:EC IPP rev J 11.04.21 DEO D412-664-243-E-1 EC verified DD IPP REV:K 11.10.03 DEO D412-664-243-E-2 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
AN6-40A Bolt		Purchased	No			250	Each	80.0000	4	Sp			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST340		80							
				123021		30							
				123900		50							
AN6-41A Bolt		Purchased	No			250	Each	44.0000	2	Sp			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST340		44							
				122407		19							
				123522		25							
AN960JD616 Washer	NAS1149D0663J	Purchased	No			250	Each	0.0000	18	2x			
D2896-1 Support		Manufactured	No			230	Each	33.0000	0	1			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				LG053		33							
				74465		8							
				86663		12							
				88695		7							
				90378		6							

m/23900 Sp

Ad 13-2-3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

December-19-12 12:56:18 PM

Page 2

Work Order ID: 94580

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 1/03/13

Required Date: 1/11/13

Start Qty: 1.00

Required Qty: 1.00

D3189-1
Chafing Shield(send DSI9629 with spares)

Manufactured No

230 Each 46.0000

2

2

AP 13-2-3

Location

Loc Qty

Loc Code

FG

4

36065

4

LG053

42

89901

4

90618

20

91673

18

D3595-063-570

RUBBER CUSHION

Manufactured No

230 Each 163.0000

2

2

AP 13-2-3

Location

Loc Qty

Loc Code

FG

10

42243

10

LG051

110

71534

1

76546

2

83294

107

LG055

43

92940

43

D412-664-203TRN

Crosstube Turning Detail

Manufactured No

110 Each 6.0000

1

1

Location

Loc Qty

Loc Code

LG014

6

90960

1

90961

1

93998

1

93999

1

94000

1

94001

1

①

MO 13/01/23

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

December-19-12 12:56:18 PM

Page 3

Work Order ID: 94580

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 1/03/13

Required Date: 1/11/13

Start Qty: 1.00

Required Qty: 1.00

MS21042L6

Nut

Purchased

No

250

Each

663.0000

6

SP 13-2-6

SK

Smp

Location

Loc Qty

Loc Code

ST314

663

117677

25

118927

48

120308

71

122441

19

123248

350

123355

150

Lex

MS21920-28

Clamp(per MIL-DTL-8783C)

Purchased

No

230

Each

73.0000

4

4

124260

(4)

At 13-2-3

Location

Loc Qty

Loc Code

FG

5

105884

5

LG050

56

118713

3

120054

2

122518

1

123674

50

LG051

12

121440

8

122204

2

123243

2

MS21920-30

clamp(per MIL-DTL-8783C)

Purchased

No

230

Each

83.0000

2

2

At 13-2-3

Location

Loc Qty

Loc Code

LG050

51

119529

1

123240

50

(2)

LG051

32

111258

14

121583

18

December-19-12 12:56:19 PM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

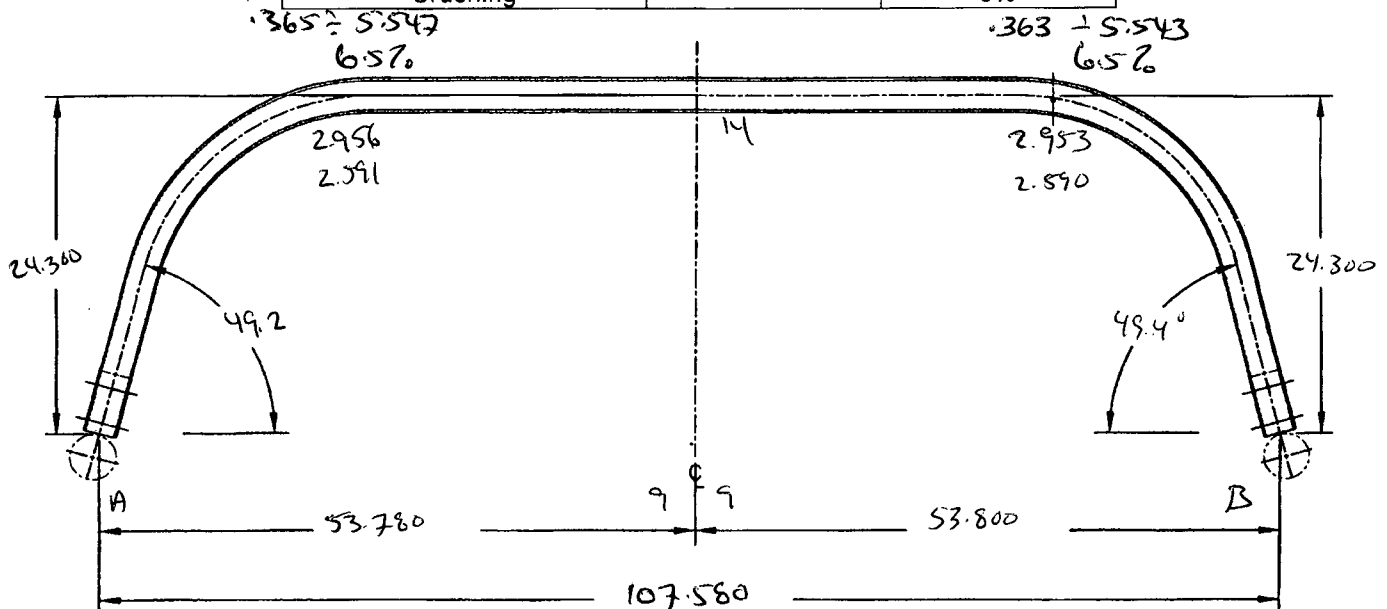
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabelled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

DART AEROSPACE LTD	Work Order:	94580
Description: Crosstube High Aft (412)	Part Number:	D412-664-203
Inspection Dwg: D412-664-243 Rev: E		Page 1 of 1

Required Dimension	Min	Max
Height	24.24	24.50
1/2 Span	53.59	53.85
Angle	49	52
Total Span	107.18	107.70
Bending Passes	8	--
Crushing	--	6%



	Side A	middle	Side B
Bending Passes	9	14	9
Crushing	6.57%		6.57%
Comments			
Side A = 6.57% crushing @ 9 Passes			
middle = 14 Passes			
Side B = 6.57% crushing @ 9 Passes			

QC15 Inspection	DAS
Date	16 13/1/25

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	07.05.08	Dimensions updated per Dwg rev. D	KJ/JLM	
C	10.02.02	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing dimensions	KJ	IP

Item	Qty -243	Part Number	Description
1	X	D412-664-243	CROSSTUBE ASSEMBLY (412 HIGH AFT)
2	1	D6009-129	CROSSTUBE
3	2	D3595-063-570	RUBBER CUSHION
4	1	D2896-1	SUPPORT
5	2	D3189-1	CHAFING SHIELD
6	2	D2856-600-1009	ABRASION STRIP
7	4	MS21920-28	CLAMP
8	2	MS21920-30	CLAMP (OR MS21920-32)
9	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

GENERAL NOTES:

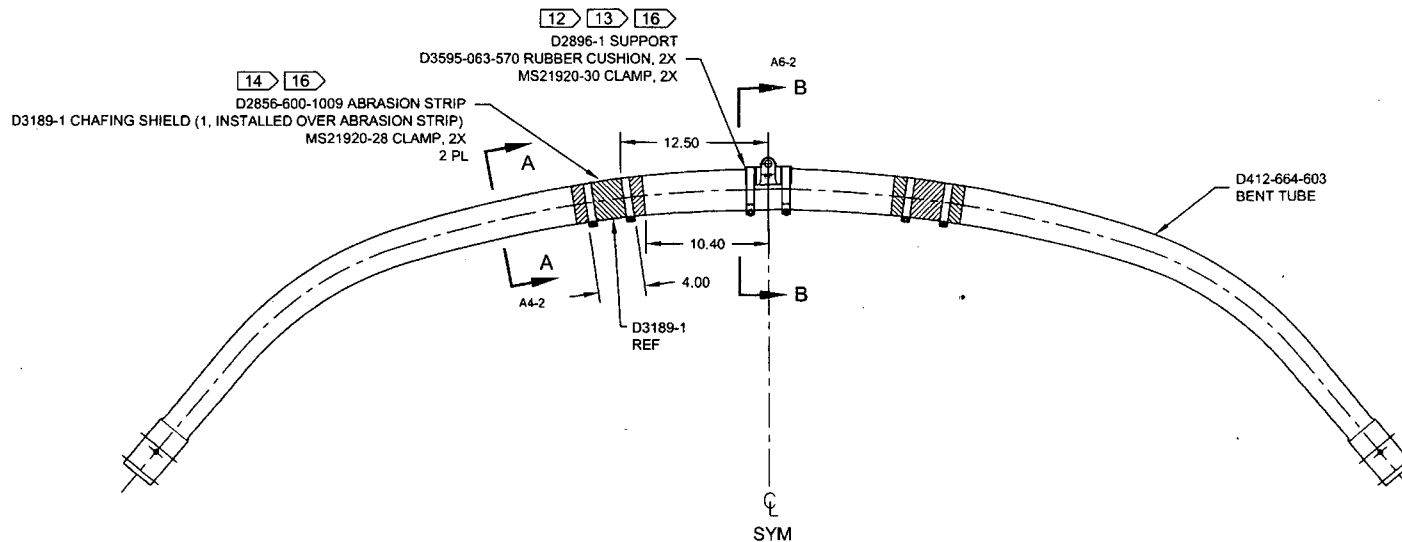
- 1) MATERIAL: MANUFACTURED FROM D6009-129
FINISHED LENGTH = 124.100±0.020 (BEFORE BENDING/TRIMMING)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D412-664-243" AND BATCH NUMBER ON INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 47.0 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 8 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2896-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2896-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-30 CLAMPS (OR -32) WITH D3595-063-570 RUBBER CUSHIONS TO SECURE THE D2896-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF CROSSTUBE PER QSI 035.
- 15) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 16) TORQUE CLAMPS 80 TO 100 IN.-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

94580
13-01-2

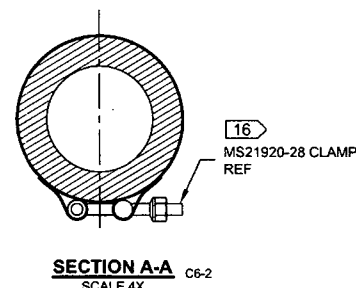
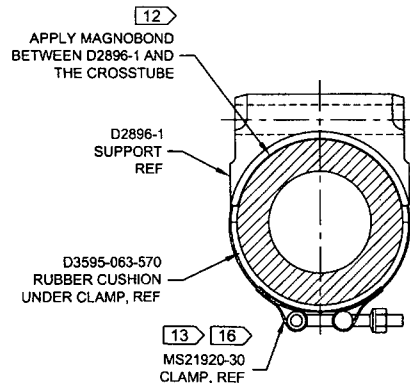
② DEO ATTACHED

RELEASED
2009-10-29

E	REFORMAT/REVISE GENERAL NOTES; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A6-3); ADD TOLERANCE (ZN B6-3, C4-3, C8-3 & C5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4.	RF	09.09.30
D	REMOVE D2732-058, CHANGE TO D3595-063-570	PH	07.03.09
C	REMOVE D2856-600-1087, ADD D2732-058 & MAGNOBOND 6398, MS21920-32 WAS MS21920-30	MB	06.10.27
B	ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES	PH	05.02.04
A	NEW ISSUE	PH	01.10.17
REV.	DESCRIPTION	BY	DATE
DESIGN	PH	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	PH	DRAWING NO.	REV. E
MFG. APPR.	PH	D412-664-243	SHEET 1 OF 4
APPROVED	PH	TITLE	SCALE
DE APPR.	PH	CROSSTUBE ASSEMBLY (412 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



D212-664-243
ASSEMBLY DETAIL



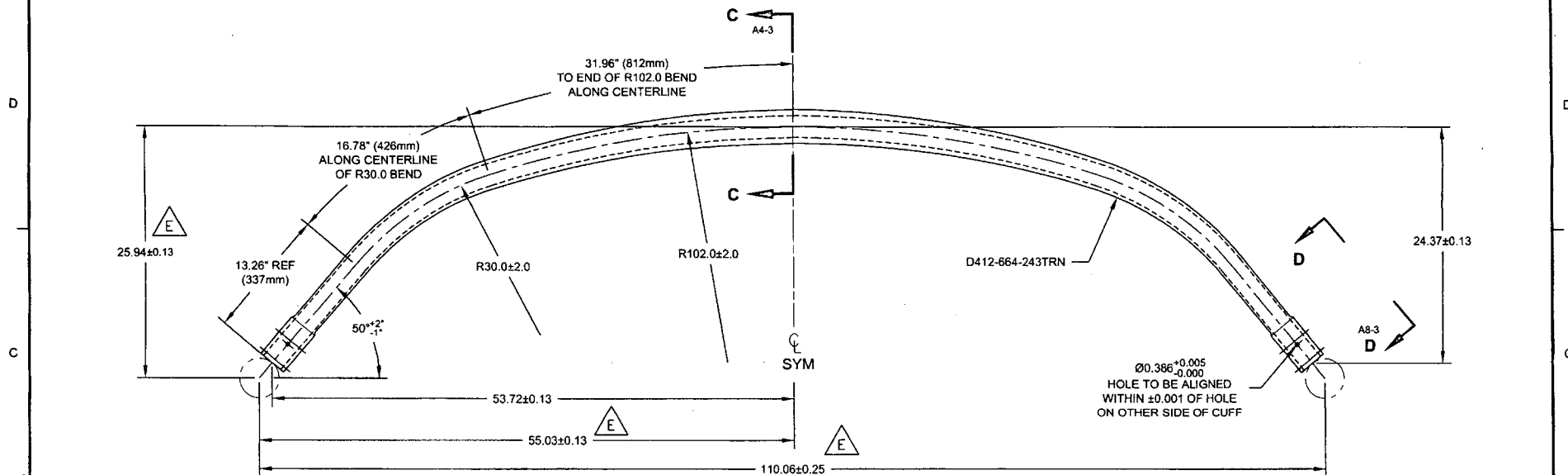
94580

2 DEO ATTACHED

RELEASED
2009-10-29
NRP

DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	9P	DRAWING NO.	REV. E
MFG. APPR.	DS	D412-664-243	SHEET 2 OF 4
APPROVED	1P	TITLE	SCALE
DE APPR.	1P	CROSSTUBE ASSEMBLY (412 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2001 BY DART AEROSPACE LTD	
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8 7 6 5 4 3 2 1

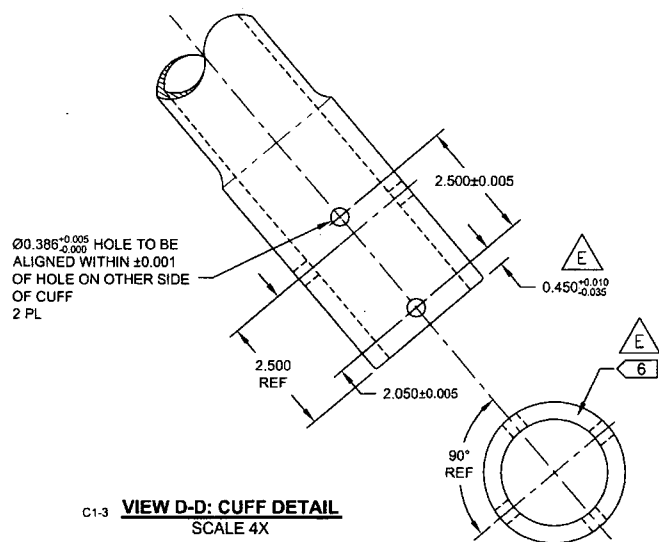


D412-664-603 10
BENDING AND DRILLING DETAIL E

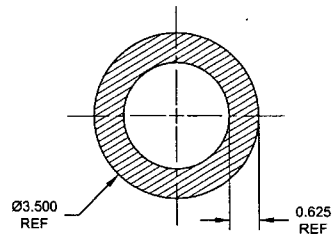
94580

② DEO ATTACHED

RELEASED
2009-10-29
MD



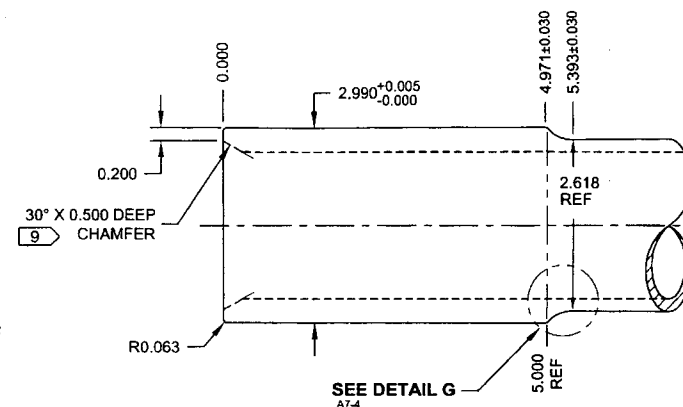
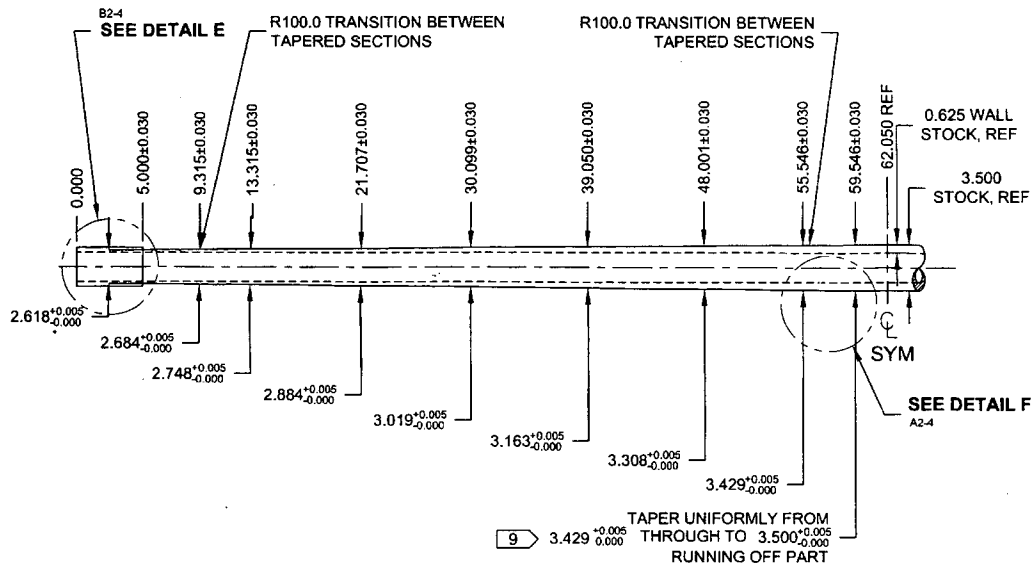
C1-3 **VIEW D-D: CUFF DETAIL**
SCALE 4X



SECTION C-C D5-3
SCALE 4X

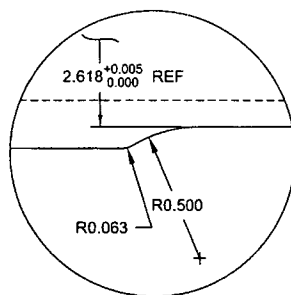
DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	92	DRAWING NO.	REV. E
MFG. APPR.	DS	D412-664-243	SHEET 3 OF 4
APPROVED	AD	TITLE	SCALE
DE APPR.	TH	CROSSTUBE ASSEMBLY (412 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2001 BY DART AEROSPACE LTD	
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8 7 6 5 4 3 2 1

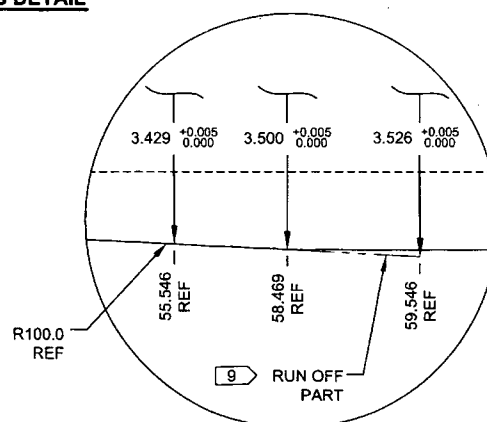


DETAIL E:
CROSSTUBE CUFF D8-4
SCALE 5X

D412-664-243TRN **TURNING DETAIL**



DETAIL G:
CUFF TRANSITION C2-4
SCALE 10X



DETAIL F:
TAPER RUN-OFF C4-4
NOT TO SCALE

94580

② DEO ATTACHED

RELEASED
2009-10-29

DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	Q	DRAWING NO.	REV. E
MFG. APPR.	IS	D412-664-243	SHEET 4 OF 4
APPROVED	AP	TITLE	SCALE
DE APPR.	14	CROSSTUBE ASSEMBLY (412 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS COMPARISON THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

DRAWING NO. D412-664-243	TITLE CROSSTUBE ASSEMBLY (412 HI AFT)	REV. E	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D412-664-243-E-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN	CHECKED	MFG. APPR.	APPROVED		DE APPR.		
DATE 11.03.31	DATE 11/03.31	DATE 11.03.31	DATE 11/03.31		DATE 11.03.31		

PURPOSE:

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890.

CHANGE:

PARTS LIST IS AMENDED AS FOLLOWS:

IS:

Item	Qty -243	Part Number	Description
6	0	D2856-600-1009	ABRASION STRIP

WAS:

6	2	D2856-600-1009	ABRASION STRIP
---	---	----------------	----------------

NOTES 2 AND 14, SHEET 1 ARE AMENDED AS FOLLOWS:

IS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA)
PAINT OUTSIDE PER DART QSI 005 4.2
AFTER PAINTING, APPLY CLEAR COAT ON HATCHED AREA
- 14) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3189-1
CHAFING SHIELD AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL
PROSEALED D3189-1 CHAFING SHIELD ONTO CROSSTUBE BY APPLYING A THIN COAT OF
PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.

WAS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF
CROSSTUBE PER QSI 035.

94580
RELEASED
2011-04-07
WD

DRAWING NO. D412-664-243	TITLE CROSSTUBE ASSEMBLY (412 HI AFT)	REV. E	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D412-664-243-E-1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN <i>[Signature]</i>	CHECKED <i>[Signature]</i>	MFG. APPR. <i>[Signature]</i>	APPROVED <i>[Signature]</i>	DE APPR. <i>[Signature]</i>		
DATE 11.03.31	DATE 11.03.31	DATE 11.03.31	DATE 11.03.31	DATE 11.03.31		

IS:

D3189-1 CHAFING SHIELD (1, INSTALLED OVER PROSEAL 890)
MS21920-28 CLAMP, 2X
2 PL

D412-664-603
BENT TUBE

2.00
1.00

WAS:

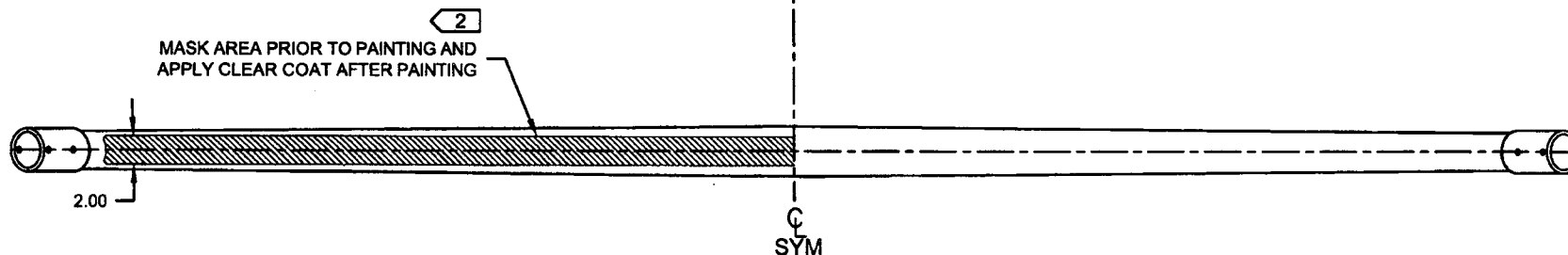
D2856-600-1009 ABRASION STRIP
D3189-1 CHAFING SHIELD (1, INSTALLED OVER ABRASION STRIP)
MS21920-28 CLAMP, 2X
2 PL

D3189-1
REF

94580

**D412-664-243
ASSEMBLY DETAIL**

RELEASED
2011-04-07
[Signature]



DRAWING NO. D412-664-243	TITLE CROSSTUBE ASS'Y (412 HI AFT)	REV. E	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D412-664-243-E-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>MP</i>	CHECKED <i>AS</i>	MFG. APPR. <i>RE</i>	APPROVED <i>MP</i>		DE APPR. <i>MP</i>		
DATE 11.09.07	DATE 11.09.19	DATE 11.09.19	DATE 11.09.19		DATE 11.09.19		

PURPOSE:

REPLACE MAGNOBOND WITH 3M DP460 SCOTCH-WELD EPOXY ADHESIVE

CHANGE:

IS:

Item	Qty -243	Part Number	Description
9	A/R	SCOTCH-WELD DP460	EPOXY ADHESIVE, 3M SCOTCH-WELD

WAS:

9	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
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NOTE 12 & 16, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) INSTALL D2896-1 CENTER SUPPORT USING A 0.04" TO 0.07" THICK LAYER OF SCOTCH-WELD DP460 PER QSI 015. LET CURE FOR 24 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER ADHESIVE HAS CURED FOR 24 HOURS.**

WAS:

- 12) INSTALL D2896-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2896-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

94580

RELEASED
2011-09-29
MP

DRAWING NO. D412-664-243	TITLE CROSSTUBE ASSEMBLY (412 HI AFT)	REV. E	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D412-664-243-E-4	SHEET NO. SHEET 1 OF 3	SCALE NTS
DRAWN 92	CHECKED A	MFG. APPR. A	APPROVED MP		DE APPR. MP		
DATE 12.08.21	DATE 12.08.30	DATE 12.08.30	DATE 12/8/30		DATE 12.08.30		

PURPOSE:

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890. UPDATE INSTALLATION OF CHAFING SHIELDS AND REDUCE TORQUE TO 40-50 IN-LBS. THIS ENGINEERING ORDER SUPERCEDES DEO D412-664-243-E-1.

CHANGE:

PARTS LIST IS AMENDED AS FOLLOWS:

IS:

Item	Qty -243	Part Number	Description
6	0	D2856-600-1009	ABRASION STRIP

WAS:

6	2	D2856-600-1009	ABRASION STRIP
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NOTES 2, 14, AND 16 ON SHEET 1 ARE AMENDED AS FOLLOWS:

IS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA)
PAINT OUTSIDE PER DART QSI 005 4.2
AFTER PAINTING, APPLY CLEAR COAT ON HATCHED AREA
- 14) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3189-1 CHAFING SHIELD AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL PROSEALED D3189-1 CHAFING SHIELD ONTO CROSSTUBE BY APPLYING A THIN COAT OF PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.
- 16) TORQUE CLAMPS ON D2896-1 SUPPORT 80 TO 100 IN-LB. **TORQUE CLAMPS ON D3189-1 CHAFING SHIELD 40 TO 50 IN-LB.** ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

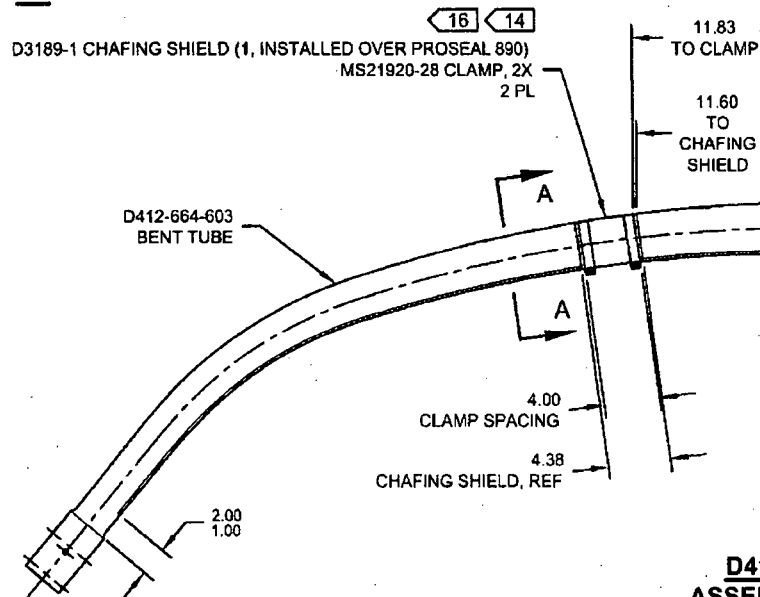
WAS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF CROSSTUBE PER QSI 035.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

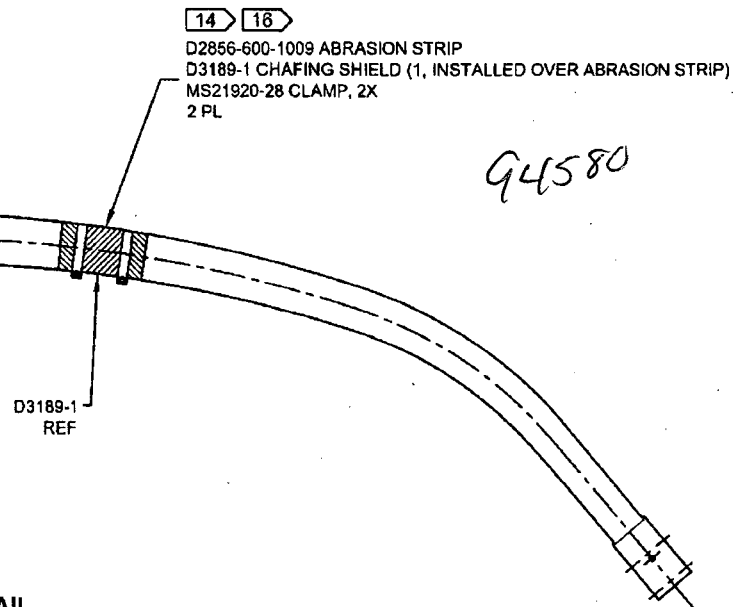
RELEASED
2012-09-04
MP

DRAWING NO. D412-664-243	TITLE CROSSTUBE ASSEMBLY (412 HI AFT)	REV. E	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D412-664-243-E-4	SHEET NO. SHEET 2 OF 3	SCALE NTS
DRAWN 97	CHECKED	MFG. APPR. AA	APPROVED	DE APPR.		
DATE 12.08.21	DATE 12.08.27	DATE 12.08.29	DATE 12.08.29	DATE 12.08.29		

IS:

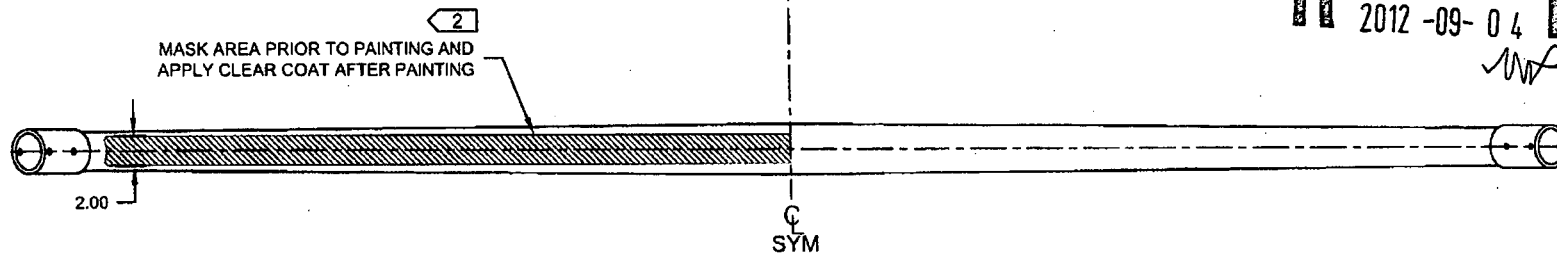


WAS:



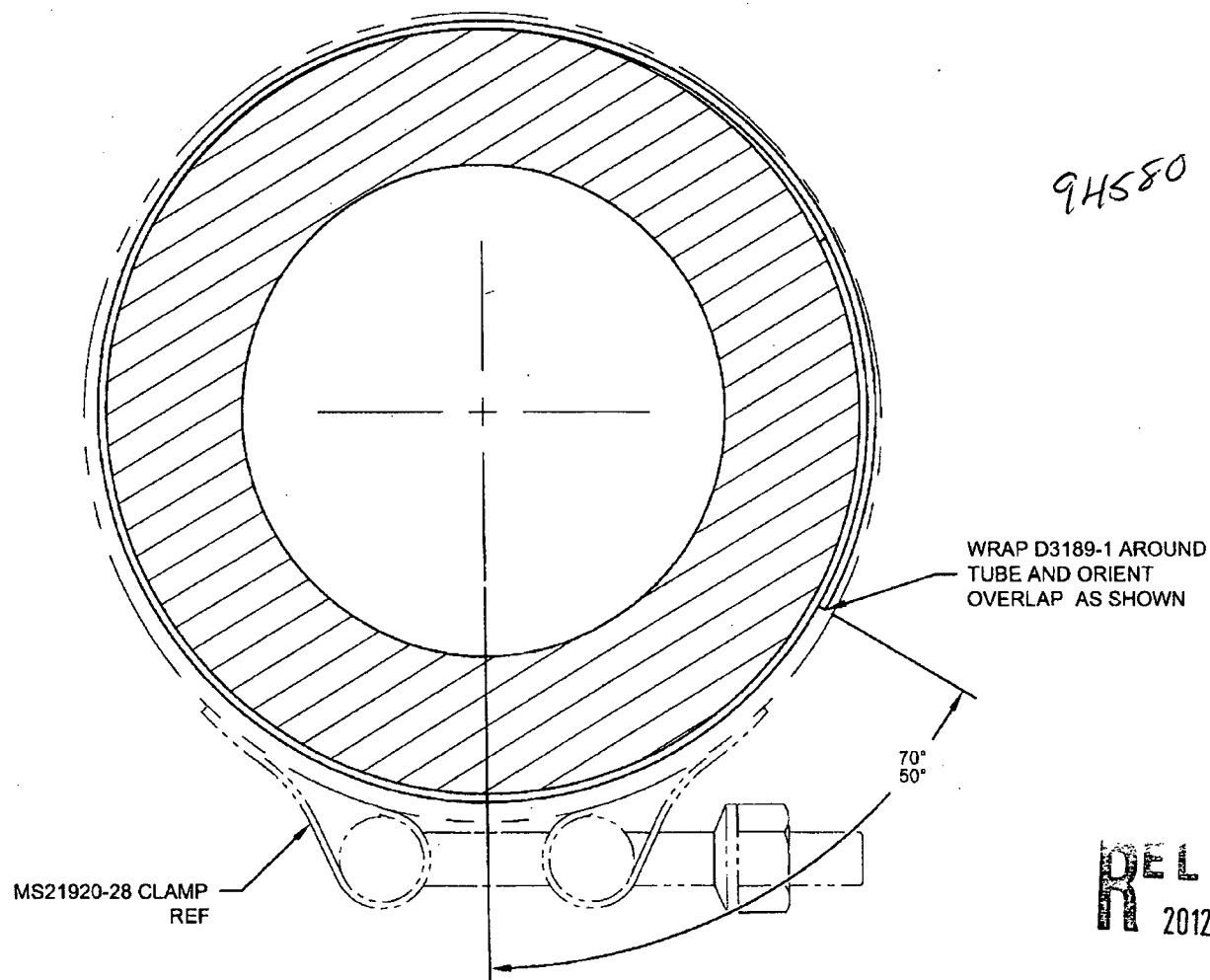
94580

**D412-664-243
ASSEMBLY DETAIL**



RELEASED
2012-09-04

DRAWING NO. D412-664-243	TITLE CROSSTUBE ASSEMBLY (412 HI AFT)	REV. E	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D412-664-243-E-4	SHEET NO. SHEET 3 OF 3	SCALE NTS
DRAWN <i>MP</i>	CHECKED <i>MP</i>	MFG. APPR. <i>MP</i>	APPROVED <i>MP</i>		DE APPR. <i>MP</i>		
DATE 12.08.21	DATE 12.08.27	DATE 12.08.29	DATE 12.08.29		DATE 12.08.29		



SECTION A-A
CHAFING SHIELD DETAIL
VIEW ROTATED, NOT TO SCALE

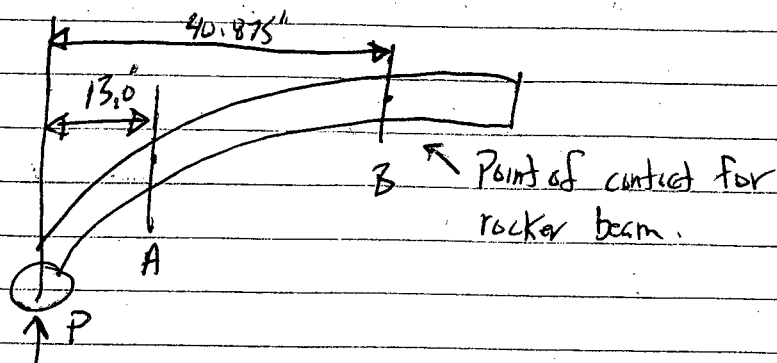
RELEASED
2012-09-04
MP

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NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT
WRITTEN PERMISSION FROM DART AEROSPACE LTD.

11.12.06

CRUSHING OF D412-664-243

Acceptability of 8% CRUSHING AT END OF BEND



Point A: $OD_1 = 2.961"$, $OD_2 = 2.522"$

$CRUSHING = (2.961 - 2.522) / (2.961 + 2.522) = 8\%$

$I = 1.676 \text{ in}^4$ (from AutoCAD)

Point B: $OD_1 = 3.307"$, $I = 4.613 \text{ in}^4$

A: $F = M_c / I = P \times 13 \times 2.961 / 2 \times 1.676 = 11.484 \times P$

B: $" = P \times 40.875 \times 3.307 / 2 \times 4.613 = 14.651 \times P$

M.S. = $14.651 / 11.484 - 1 = 0.27$

∴ Tube will break at rocker beam contact before area of 8% crushing, 8% crushing in area at end of tube bend is acceptable

11.12.06

Hilroy



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO18997**

Purchase Order Date 1/31/13

PO Print Date 1/31/13

Page Number 2 of 2

Order From :

VC-ACU002

ACUREN
2190 SPEERS ROAD
OAKVILLE ON L6L 2X8
CA

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

613 931 1261

613 931 2777

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

10127-2607

Net 30

CAD

Destination-Collect

4	95455 ✓	D212-664-201 CROSSTUBE	1/31/13	1.00	Yours ppd	\$130.2900	\$130.29
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Yes

Special Inst:

LIQUID PENETRANT INSPECTION AS
PER QSI 038 OR
LPI AS PER ASTM 1417 LEVEL 2

5	95456 ✓	D212-664-201 CROSSTUBE	1/31/13	1.00	Yours ppd	\$130.2900	\$130.29
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Yes

Special Inst:

LIQUID PENETRANT INSPECTION AS
PER QSI 038 OR
LPI AS PER ASTM 1417 LEVEL 2

6	94580 ✓	D412-664-203 CROSSTUBE	1/31/13	1.00	Yours ppd	\$130.2900	\$130.29
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Yes

Special Inst:

LIQUID PENETRANT INSPECTION AS
PER QSI 038 OR
LPI AS PER ASTM 1417 LEVEL 2

7	94581 ✓	D412-664-203 CROSSTUBE	1/31/13	1.00	Yours ppd	\$130.2900	\$130.29
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Yes

Special Inst:

LIQUID PENETRANT INSPECTION AS
PER QSI 038 OR
LPI AS PER ASTM 1417 LEVEL 2

**CERTIFICATE OF CONFORMITY
REQD UPON DELIVERY**

PO Total:

\$912.03

Change Nbr:

1

Change Date: 1/31/13

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - **YES** NO



Daily Time Report

E- 120385

Form dated September 2010

Client: Dart Aerospace
 Contact: Linda, chantale, Andy
 Location: 1270 Aberdeen St Hawkesbury, on
 Description: Pt - wet Fluo
 Report #s: P-10191

Job #: _____
 Day: Sun Mon Tues
 P.O. #: _____
 Vehicle # AM

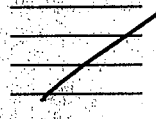
Date: Jan 31 2013
 Wed Thurs Fri Sat
 W.O #: 182-13-00211
 Camera #: _____

Name	Specialist	Tech.	CEDO	Assistant	Start Time	Total Hours				LOA (✓) ONLY	OTM (✓) ONLY	Labour Agreement (if known) or type of work	TLD No.	Daily DRD Readings
						Travel	Worked	SP	KM					
<u>Alexandre Michaud</u>		✓			<u>6:00</u>	<u>3</u>	<u>4</u>		<u>20</u>				<u>89731</u>	<u>0</u>

WELD INSPECTION SUMMARY

Weld Diameter										Long Seam					Circ. Seam				
Schedule/Thickness										Thickness					Thickness				
Quantity										Lineal Ft.					Lineal Ft.				

Film:



Pcs. 2 1/4 x 17"
 Pcs. 3 1/2 x 17"
 Pcs. 4 1/2 x 17"
 Pcs. 14" x 17"
 Pcs. _____

Re-billable expenses: _____

Equipment charges: _____

Client Representative: [Signature]

Consumables
(cans / litres):

UT 1 PT _____ MT _____

NOTES:

ACUREN 1-877-295-2857

Cambridge, ON (519) 622-3112 • Fax (519) 622-1326
 Cantley, QC (819) 360-0685 • Fax (819)-827-3513
 Cornwall, ON (613) 931-1261 • Fax (613) 931-2777
 Gaspé, QC (418) 392-3618 • Fax (418) 392-4114
 Halifax, NS (902) 443-4448 • Fax (902) 445-5090
 Jonquiere, QC (418) 542-8273 • Fax (418) 542-5494
 Mississauga, ON (905) 673-9899 • Fax (905) 673-8394
 Montreal, QC (450) 492-3399 • Fax (450) 492-5682
 North Bay, ON (705) 840-8107 • Fax (705) 476-6683
 Oakville, ON (905) 825-8595 • Fax (905) 825-8598
 Pickering, ON (905) 839-0015 • Fax (905) 839-5641
 Port Elgin, ON (519) 389-6797 • Fax (519) 389-6799
 St. John's, NL (709) 753-2100 • Fax (709) 753-7011
 Sarnia, ON (519) 336-3021 • Fax (519) 336-8220
 Sherbrooke, QC (819) 620-5456 • Fax (819) 346-6829
 Sudbury, ON (705) 522-1849 • Fax (705) 522-9926
 Thunder Bay, ON (807) 475-4240 • Fax (807) 577-2017
 Timmins, ON (705) 365-8313 • Fax (705) 267-2855
 Val D'Or, QC (819) 856-6789 • Fax (819) 825-9564